

Family Preservation Services

Program Report | FISCAL YEAR 2015



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Commissioner

Executive Summary
Family Preservation Services
Fiscal Year 2015 Program Report
(JULY 1, 2014 TO JUNE 30, 2015)

Family Preservation Services (FPS) is an intensive, in-home, crisis intervention and family education program targeted to families whose children are at imminent risk of abuse, neglect and out-of-home placement or those who are preparing for reunification. The goals of the program are to:

- ❖ ensure child safety,
- ❖ stabilize the family,
- ❖ prevent out-of-home placement,
- ❖ improve family functioning, and
- ❖ link families with appropriate community resources.

Services include: child and family assessments; skill based interventions, counseling and related support; linkages to community resources; limited financial assistance; and follow-up. Services are provided in the family's home or related environment as circumstances warrant.

FPS staff is available to families 24 hours a day, seven days a week for a period of up to eight weeks. Program interventions are intensive, providing each family five to 20 hours of direct face-to-face service per week depending on the nature and severity of their situation and presenting problems. All services are designed to build on family strengths and respond to a wide range of family needs.

All referrals for services are made by Child Protection & Permanency (CP&P) Local Offices and family participation in the program is voluntary. Families remain under CP&P supervision while receiving FPS services.

The New Jersey Department of Children and Families (DCF) currently funds FPS programs in each of New Jersey's 21 counties for CP&P families. During Fiscal Year 2015:

- ❖ Total contract funding for FPS services remained at approximately six million dollars.
- ❖ 872 families and 2,006 children received FPS services.
- ❖ From initial intake to discharge, 97% of the families served by FPS remained preserved in their target home.
- ❖ Of the 2,006 children who received services, 47% were 6 years of age or younger
- ❖ Follow-Up Data indicates that 1,642 of 1,646 children served in SFY 2014 were successfully tracked one year after discharge from an FPS program. Of children tracked for one year, 1,479 (90%) were either at home or in another stable living arrangement, 36 had voluntarily relocated or were residing in an alternative living arrangement not related to child protective services, and 127 (8%) were in out-of-home placement, constituting a 90% long-term rate of being preserved in their target home.

FAMILY PRESERVATION SERVICES
FISCAL YEAR 2015 PROGRAM REPORT
(JULY 1, 2014 TO JUNE 30, 2015)

SECTION I: PROGRAM OVERVIEW

The New Jersey Department of Children and Families (DCF) funds Family Preservation Services (FPS) programs in each of New Jersey's 21 counties through contracts with 14 community-based provider agencies. Six agencies operate programs in more than one county. During Fiscal Year 2015, total annual funding for FPS services remained at approximately six million dollars. Based on this figure and statewide levels of service, the estimated average cost per family is \$6,880.73 dollars.

THE FPS MODEL

FPS is an intensive, in-home, crisis intervention and family education program that targets families under CP&P supervision and whose children are determined to be at imminent risk of out-of-home placement or preparing for reunification from an out-of-home placement.

FPS services are delivered by specially trained staff that provide a combination of counseling and concrete services that respond to each family's unique needs. As specified in the enacting legislation (N.J.S.A. 30:4C-74), direct service staff carry a caseload of no more than two families at any given time, except that during the last week prior to discharging one family, staff may carry a third case.

The goals of the FPS program are to:

- ❖ Ensure the safety of children,
- ❖ Stabilize the family,
- ❖ Improve family functioning,
- ❖ Prevent unnecessary out-of-home placement, and
- ❖ Link families with appropriate community resources.

Services are provided in the family's home or related environment as circumstances warrant and in accordance with the established program model set forth in the New Jersey Family Preservation Services Manual and the enacting statute.

Staff are available to families 24 hours a day, seven days a week for a period of up to eight weeks. Program interventions are intensive, providing families no less than five and no more than 20 hours of direct face-to-face service each week depending on the nature and severity of their situation. More specifically:

- ❖ Initial visits with the family are conducted within 24 hours of referral. The referring CP&P Case Manager is invited to attend the first home visit,
- ❖ Initial and final assessments of family functioning are conducted using the North Carolina Family Assessment Scales (NCFAS),
- ❖ Goal directed interventions are developed in consultation with the family to address the reason(s) for the risk determination and the identification of services and/or activities to be achieved within specified time frames,
- ❖ Using a behavioral/cognitive approach and building on family strengths, trained staff provide instruction and model skills that are designed to improve family functioning in areas including, but not limited to: parenting, stress management, communication and crisis management,

- ❖ Concrete services are provided to families as needed. Such services may include, but are not limited to: emergency financial assistance, food, clothing, transportation and housing assistance,
- ❖ Follow up evaluations are completed at three-, six-, and 12-month intervals after families are discharged.

SECTION II: SERVICE STATISTICS

This section provides aggregate data regarding program use rates and the delivery of services at each of the 21 county sites for the period July 1, 2014 to June 30, 2015.

REFERRALS

CP&P is the sole source of referrals to FPS programs. Families are eligible for FPS when there is a presenting crisis that places at least one child at risk of being removed from home; or when a child is returning from out-of-home placement. Eligibility criteria include active CP&P cases in which:

- ❖ the child can remain safely in the home with intensive services
- ❖ the family has agreed to participate
- ❖ other less intensive services will not sufficiently reduce the risk, or are unavailable

Occasionally, FPS programs receive inappropriate referrals and must “turn back” cases to the referring CP&P office. This determination is made within 72 hours of receiving the referral.

According to FPS program standards, cases may be returned to CP&P when:

- ❖ the risk of placement is not imminent and the child can benefit from less intensive services
- ❖ the safety risk is too great for the child to remain at home
- ❖ the goal is to keep the family together until a suitable placement is secured
- ❖ the youth presents a significant risk to self and/or others
- ❖ the family's presenting problem indicates a need for longer term, less intensive services
- ❖ the family declines FPS services
- ❖ there is a lack of available program slots

Table 1 provides a statewide summary of FPS referrals and turn-backs during SFY 2015.

TABLE 1: TOTAL NUMBER OF FPS REFERRALS & TURN BACKS

COUNTY	FAMILIES REFERRED	TURN-BACKS
Atlantic	14	29%
Bergen	57	16%
Burlington	96	8%
Camden	56	9%
Cape May	58	3%
Cumberland	52	6%
Essex	60	22%
Gloucester	42	2%
Hudson	45	11%
Hunterdon	29	7%
Mercer	50	22%
Middlesex	63	33%
Monmouth	46	7%
Morris	52	31%
Ocean	47	4%
Passaic	44	18%
Salem	51	16%
Somerset	33	21%
Sussex	55	24%
Union	50	40%
Warren	33	0%
TOTAL	1,033	16%

Of the 1,033 families referred to FPS statewide during FY 2015, 161 were “turned back.” As in prior years, a family’s unwillingness to participate in FPS programming was the primary reason for “turn backs.” Table 2 lists reasons why 161 cases were returned to CP&P.

TABLE 2: REASONS FOR "TURN BACKS"

REASON FOR TURN BACK	NO. OF FAMILIES	PERCENTAGE
Family declined FPS services or is unavailable	125	78%
Child placed prior to FPS intervention or during 72 hr. assessment period	12	7%
Child not at imminent risk of placement	3	2%
Safety concerns for FPS staff	4	2%
Active Domestic Violence	1	1%
Other	16	10%
Total	161	100%

Table 3 provides a statewide overview of the total number of families and children who entered FPS programs during the reporting period.

TABLE 3: FPS SERVICE PARTICIPANTS

COUNTY	FAMILIES	CHILDREN
Atlantic*	10	26
Bergen	48	106
Burlington	88	189
Camden	51	127
Cape May	56	128
Cumberland	49	132
Essex	47	109
Gloucester	41	100
Hudson	40	93
Hunterdon	27	78
Mercer	39	103
Middlesex	42	87
Monmouth	43	94
Morris	36	65
Ocean	45	106
Passaic	36	75
Salem	43	87
Somerset	26	59
Sussex	42	94
Union	30	70
Warren	33	78
TOTAL	872	2,006

*There was a decrease in the amount of children and families served for Atlantic County during FY 15 as Atlantic County changed agencies mid-year resulting in fewer families referred during the transition.

TABLE 4: AGE OF CHILDREN SERVED

0-6 Years	7-12 Years	13-18 Years	19+ Years	Total
949 (47%)	642 (32%)	414 (21%)	1 (<1%)	2,006

CHILD PROTECTIVE SERVICES CONCERNS AND DETERMINATIONS

Of the 872 families that entered FPS programs, the most frequently cited source of risk identified by DCF was child neglect. Table 5 lists the child protective services determinations that resulted in CP&P involvement in the family and eventual referral to FPS.

TABLE 5: SOURCE OF RISK

SOURCE OF RISK	NO. OF FAMILIES	PERCENTAGE
Neglect	586	67%
Physical Abuse	216	25%
Emotional Abuse	57	7%
Sexual Abuse	12	1%
Unification Failure*	1	0.1%
TOTAL	872	100%

*Unification Failure is used for those situations where a child is placed with a parent who was not involved in the circumstances that prompted a child's initial removal from home, but this living situation is determined to be a source of risk for the child and requires FPS intervention.

Families involved with DCF experience many issues, conditions and circumstances (either acute, chronic, or cumulative) that impact their ability to ensure child safety and provide a stable home environment for their children. Table 6 lists the many stress factors that were identified among the 872 families that participated in FPS programs.

TABLE 6: FAMILY STRESS FACTORS

Family Stress Factors	Totals	Percentage of Families
Financial	399	46%
Mental health (parent)	326	37%
Mental/behavior health (child)	317	36%
Housing related	291	33%
Domestic violence history	256	29%
Substance abuse (parent)	226	26%
Disability (parent)	61	7%
Delinquency	57	7%
Physical health (child)	57	7%
Disability (child)	50	6%
Physical health (parent)	47	5%
Substance abuse (child)	22	3%
Geographic Isolation	11	1%
None Reported	5	1%
Daily routines/ time management	0	0%
Household management	0	0%
Support health/ medical care	0	0%

*FPS does not provide services to families that are currently experiencing domestic violence or when there has been a domestic violence incident within six months. DCF protocols and other specialized programs exist to address the needs of these families.

Each child under CP&P supervision has a case goal that drives the delivery of FPS services in their target home. Table 7 provides a summary of the CP&P case/service goals that were established for each of the 2,006 children whose families participated in FPS.

TABLE 7: CP&P CASE/SERVICE GOALS

Case/Service Goal	Children	Percentage
Stabilize in Home	1,782	89%
Reunification	195	10%
Stabilize in placement	29	1%
TOTAL	2,006	100%

SERVICE INTERVENTIONS

A referral becomes an intervention when the family and FPS program agree that FPS services are appropriate. For the period July 1, 2014 to June 30, 2015, a total of 872 families and 2,006 children received FPS services.

While the method and focus of FPS service interventions varies from family-to-family, the service categories listed below are a broad picture of the assistance FPS provided to families.

TABLE 8: TYPES OF FPS SERVICES PROVIDED

SERVICES	UNITS PROVIDED	PERCENTAGE OF FAMILIES
Parenting skills	536	61%
Stress management/ Coping	329	38%
Concrete services*	287	33%
Communication skills	239	27%
Daily routines/ time management	204	23%
Access resources	202	23%
Behavior management	197	23%
Anger/Conflict resolution	166	19%
Household management	162	19%
Support mental health treatment	133	15%
Safety Strategies	130	15%
Budget/ Finance management	109	13%
Support sub abuse treatment	80	9%
Employment assistance	45	5%
Support health/ medical care	45	5%

*Concrete Services may include emergency financial assistance, food, clothing, transportation, and housing assistance

FPS does not provide substance abuse, mental health, or medical services. FPS staff works with families to reinforce and complement specialized care and treatment plans from a family systems perspective. For example, individuals participating in substance abuse treatment programs require an environment, relationships, and life skills that support their on-going recovery and sobriety.

FPS service interventions span four to eight weeks, depending on each family's unique needs and case goals. During this period, each family receives no less than five and no more than 20 hours per week of direct services.

Programs are required to record the time spent on each case. Service hours are divided into two categories:

- ❖ Direct Service Hours: face-to-face contact between the FPS worker and the family
- ❖ Indirect Service Hours: all other time spent on behalf of the family, including but not limited to documentation, advocacy, collateral contacts, case consultation, supervision, and travel.

Table 9 lists the duration and frequency of FPS services provided to participating families:

TABLE 9: DURATION AND FREQUENCY OF SERVICES PROVIDED TO FAMILIES

COUNTY	No. FAMILIES SERVED	AVG. LENGTH OF STAY (Weeks)	DIRECT SERVICE HOURS PER FAMILY (Avg. per Week)	INDIRECT SERVICE HOURS PER FAMILY (Avg. per Week)	TOTAL SERVICE HOURS PER FAMILY (Avg. per Week)
Atlantic	10	5.5	6.2	12.4	18.6
Bergen	48	4.6	5.8	7.1	12.8
Burlington	88	3.5	6.7	4.9	11.6
Camden	51	3.9	9.2	10.0	19.2
Cape May	56	4.8	5.4	8.7	14.0
Cumberland	49	3.7	6.3	6.2	12.4
Essex	47	5.1	7.1	9.3	16.4
Gloucester	41	4.2	9.9	13.5	23.5
Hudson	40	4.8	4.8	7.5	12.3
Hunterdon	27	5.2	4.4	10.1	14.5
Mercer	39	5.7	6.9	7.1	14.0
Middlesex	42	5.0	6.1	9.8	15.9
Monmouth	43	4.4	8.0	10.3	18.3
Morris	36	6.0	4.6	4.8	9.4
Ocean	45	5.7	6.6	12.5	19.1
Passaic	36	6.4	5.7	7.0	12.7
Salem	43	5.5	5.8	11.4	17.2
Somerset	26	4.2	5.1	8.6	13.7
Sussex	42	4.8	5.6	1.6	7.2
Union	30	5.1	6.8	9.0	15.8
Warren	33	5.1	5.3	10.5	15.7
TOTAL	872	4.8	6.3	8.4	14.8

FPS programs provide very limited financial assistance to help families overcome barriers to success and reinforce the therapeutic process. Assistance may be used to:

- ❖ Address concrete needs that jeopardize the family’s stability
- ❖ Strengthen and promote family relationships
- ❖ Reward progress or goal attainment

Not every family served by FPS receives financial assistance. Disbursements are made at the discretion of programs based on the needs of each family. Allowable expenditures may include: essential household items; engagement activities; skill building aids such as books, videos, and games; and low-cost “reinforcement” to reward achievements. Table 10 describes the financial assistance provided by FPS programs.

TABLE 10: FINANCIAL ASSISTANCE PROVIDED TO FAMILIES

FINANCIAL ASSISTANCE	
Total No. of Families Served by FPS	872
No. Families that Received Financial Assistance	451
Total Amount of Financial Assistance Distributed	\$18,934.22
Average Amount per Family	\$41.98
Percentage of Families that Received Financial Assistance	52%

The FPS Model has clear standards regarding a family’s termination or discharge from the program. Because FPS is a short-term intervention program, discharge planning begins early with the goal of linking families to other community services and supports.

FPS is a voluntary program and families can withdraw at any time, however every effort is made to maintain their engagement. When families choose to discontinue their participation in the program, FPS informs the CP&P case manager, provides linkages to other relevant services, and closes the case.

Termination can and often does occur when families destabilize and safety concerns become too great for children to remain at home. FPS remains actively involved with families that experience short-term out of home placement for seven days or less. During this time, FPS works to facilitate the child’s timely return if possible. FPS must close the case when a placement exceeds seven days.

When FPS cases are closed and services terminated, interventions are classified into two categories:

- ❖ Full Intervention: FPS services last a minimum of 28 days or all case goals are achieved
- ❖ Interrupted Intervention: FPS services end prior to 28 days as a result of the family discontinuing FPS services or another reason beyond the control of FPS

Table 11 displays the intervention status of closed FPS cases by County.

TABLE 11: INTERVENTION STATUS (CLOSED CASES)

COUNTY	% FULL INTERVENTION	% INTERRUPTED INTERVENTION	TOTAL FAMILY INTERVENTIONS
Atlantic	90%	10%	10
Bergen	94%	6%	48
Burlington	86%	14%	88
Camden	80%	20%	51
Cape May	89%	11%	56
Cumberland	84%	16%	49
Essex	74%	26%	47
Gloucester	85%	15%	41
Hudson	88%	13%	40
Hunterdon	78%	22%	27
Mercer	92%	8%	39
Middlesex	71%	29%	42
Monmouth	98%	2%	43
Morris	97%	3%	36
Ocean	98%	2%	45
Passaic	89%	11%	36
Salem	86%	14%	43
Somerset	77%	23%	26
Sussex	81%	19%	42
Union	77%	23%	30
Warren	91%	9%	33
TOTAL	86%	14%	872

Treatment goals are formed within 10 days of the initial FPS assessment through a collaborative process that includes FPS, the referring CP&P worker, and the family. These goals are developed to address the reasons for the risk determination that precipitated the referral, and the information that was obtained during the assessment period. All treatment goals are specific to each family, clearly delineated, and achievable within the duration of the FPS intervention. Table 12 provides a summary of the extent to which participating families attained their respective treatment goals at the point of discharge.

TABLE 12: STATUS OF TREATMENT GOALS AT DISCHARGE

Individualized Treatment Goals	Total	Percentage
All Treatment Goals Met	457	52%
Significantly Met (50% +)	207	24%
Partially Met (49%-20%)	73	8%
Minimal or No goals Met (10%-0)	135	15%
TOTAL	872*	100%

*Includes 121 interrupted interventions which by definition, include families that did not complete the program or attain all of their respective treatment goals.

FPS programs track the whereabouts of all children from the time the case is accepted through discharge and beyond. Table 13 details the placement disposition of every child who received services in FY 2015 and whose case was closed by FPS during the reporting period.

TABLE 13: LOCATION OF CHILDREN SERVED AT DISCHARGE

Housing Location at Discharge	Total	Percentage
In Home	1,865	93.0%
Foster Care	66	3.3%
With Relative	23	1.1%
Other Family-like Setting	22	1.1%
Shelter	15	0.7%
Incarcerated/Detention	1	0.05%
In-state Residential	1	0.05%
Group Home	0	0%
Ran Away	0	0%
Substance Abuse Rehab.	0	0%
Other	6	0.3%
Unknown/Information Not Available*	7	0.3%
TOTAL	2,006	100%

*The "Unknown" term describes the inability to provide the child's location at discharge. The majority of these children discharged as "interrupted interventions" causing FPS to be unable to complete full interventions with them.

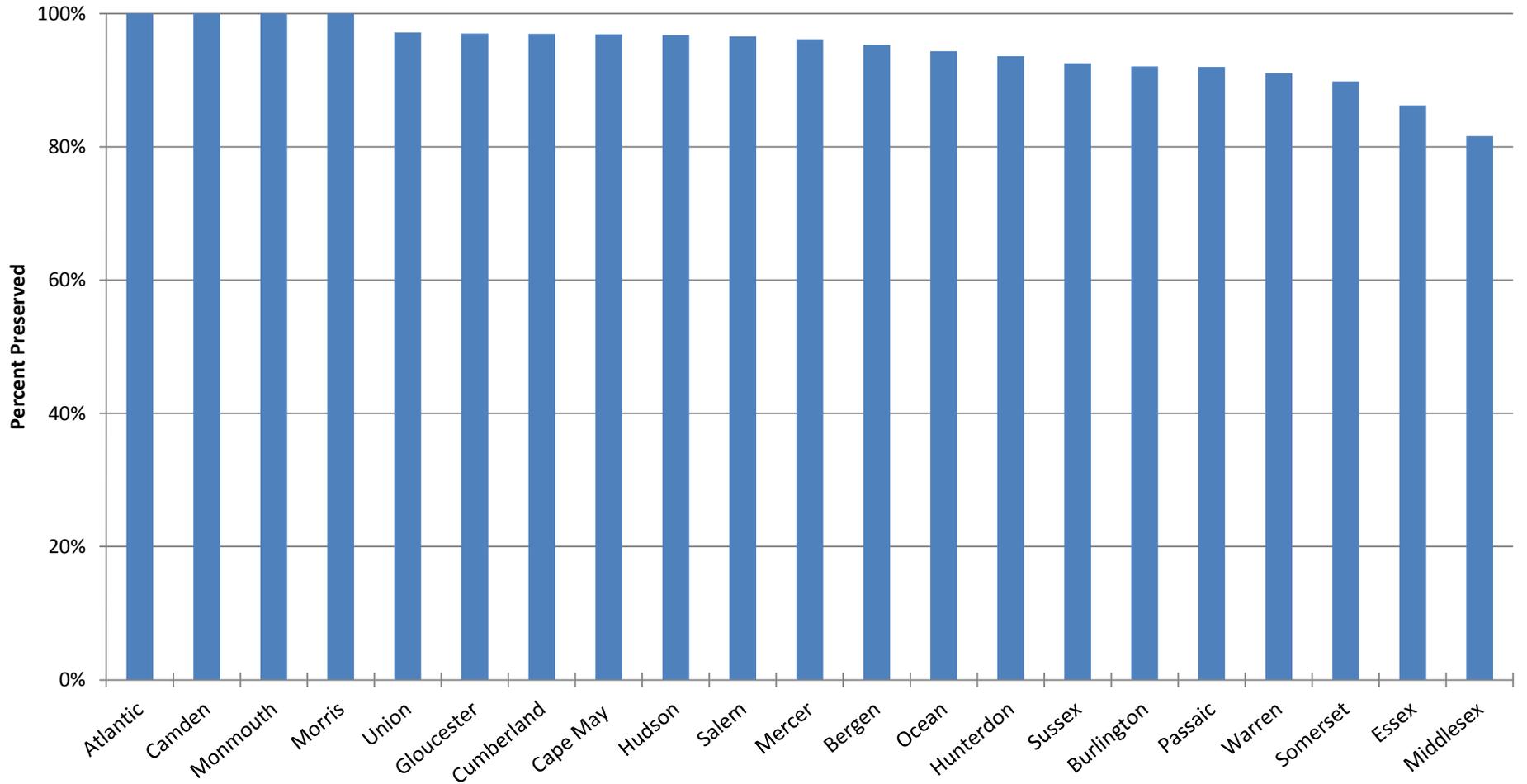
Table 14 provides a broad overview of the levels, programmatic delivery, and impact of FPS services statewide.

TABLE 14: SUMMARY OF FPS SERVICE INTERVENTIONS

County	Clients Served		FPS Services Provided				Child's Status at Discharge*			% Preserved
	Families	Children	Avg. Length of Stay (Weeks)	DIRECT SERVICE HOURS PER FAMILY (Avg. per Week)	FULL INTERVENTION	INTERRUPTED INTERVENTION	Preserved	Placed	Other	
Atlantic	10	26	5.5	6.2	9	1	26	0	0	100%
Bergen	48	106	4.6	5.8	45	3	101	3	2	95%
Burlington	88	189	3.5	6.7	76	12	174	1	14	92%
Camden	51	127	3.9	9.2	41	10	127	0	0	100%
Cape May	56	128	4.8	5.4	50	6	124	2	2	97%
Cumberland	49	132	3.7	6.3	41	8	128	2	2	97%
Essex	47	109	5.1	7.1	35	12	94	14	1	86%
Gloucester	41	100	4.2	9.9	35	6	97	1	2	97%
Hudson	40	93	4.8	4.8	35	5	90	0	3	97%
Hunterdon	27	78	5.2	4.4	21	6	73	0	5	94%
Mercer	39	103	5.7	6.9	36	3	99	3	1	96%
Middlesex	42	87	5.0	6.1	30	12	71	15	1	82%
Monmouth	43	94	4.4	8.0	42	1	94	0	0	100%
Morris	36	65	6.0	4.6	35	1	65	0	0	100%
Ocean	45	106	5.7	6.6	44	1	100	4	2	94%
Passaic	36	75	6.4	5.7	32	4	69	4	2	92%
Salem	43	87	5.5	5.8	37	6	84	2	1	97%
Somerset	26	59	4.2	5.1	20	6	53	3	3	90%
Sussex	42	94	4.8	5.6	34	8	87	2	5	93%
Union	30	70	5.1	6.8	23	7	68	1	1	97%
Warren	33	78	5.1	5.3	30	3	71	3	4	91%
TOTAL	872	2,006	4.8	6.3	751	121	1,895	60	51	94%

*Child's Status at Discharge: "Preserved" means the child remained in the target home; "Placed" means the child was in a DCF out-of-home placement setting; "Other" means the child voluntarily relocated or was residing in an alternative living arrangement not related to child protective services.

NJ SFY 2015 Family Preservation Services Children Preserved at Discharge



SECTION III: FOLLOW-UP DATA

CASE FOLLOW-UP (SFY 2014)

Follow up evaluations are completed at three, six, and 12-month intervals after families are discharged from the program. The number of children who remain with their families one year after receiving services is clearly tied to the overarching goal of placement prevention and is considered an indicator of success for FPS agencies.

Table 15 displays information regarding 12 month follow up results for children who received services between July 1, 2013 and June 30, 2014 (SFY 2014).

TABLE 15: 12-MONTH FOLLOW-UP RESULTS FOR CHILDREN SERVED IN SFY 2014

County	No. Children Eligible for Follow-Up	% Contacts Made	Preserved	Placed	Other*	% Preserved*
Atlantic	65	100%	58	1	6	89%
Bergen	93	100%	81	12	0	87%
Burlington	143	100%	124	11	8	87%
Camden	145	100%	145	0	0	100%
Cape May	107	100%	106	1	0	99%
Cumberland	86	100%	75	10	1	87%
Essex	92	98.9%	86	5	0	95%
Gloucester	111	100%	111	0	0	100%
Hudson	58	100%	54	1	3	93%
Hunterdon	63	100%	49	11	3	78%
Mercer	90	100%	81	9	0	90%
Middlesex	42	100%	40	1	1	95%
Monmouth	77	100%	64	5	8	83%
Morris	51	100%	41	6	4	80%
Ocean	106	100%	88	17	1	83%
Passaic	66	95%	47	14	2	75%
Salem	76	100%	68	5	3	89%
Somerset	69	100%	60	9	0	87%
Sussex	70	100%	65	4	1	93%
Union	43	100%	38	4	1	88%
Warren	58	100%	56	2	0	97%
TOTAL	1,711	99.8%	1,537	128	42	90%

*Other means the child voluntarily relocated or was residing in an alternative living arrangement not related to child protective services.

*% Preserved is calculated based on the number of contacts made.

More specific information regarding the status and housing location of children served one year post-discharge is presented in Tables 16 and 17.

TABLE 16: STATUS OF CHILDREN SERVED IN SFY 2014

Follow-Up Status	Total	Percentage
Preserved: Remains in home	1466	86%
Placed by CP&P safety reasons	112	6.6%
Preserved: Reunified with family	58	3.4%
Voluntary move or relocation	23	1.3%
Brief placement & reunified within period	16	0.9%
Other placement non-safety reasons	14	0.8%
Preserved: Stabilized in foster home	13	0.8%
Other	5	0.3%
TOTAL	1,707	100%

*There were four children whose follow-up status was unknown. These are children who could not be contacted by FPS or CP&P for a variety of reasons, i.e. their CP&P case was closed or the family moved out of NJ. These children were not included in the number of follow-ups.

TABLE 17: HOUSING LOCATION OF CHILDREN SERVED IN SFY 2014

HOUSING LOCATION AT 12-MONTH FOLLOW-UP	NO. OF CHILDREN
In Home	1527
Foster care	99
With relative	47
Other family-like setting	12
In-state residential	6
Shelter	6
Incarcerated/ Detention	5
Group home	2
Living independently	2
Out-of-state residential	1
Substance Abuse Rehab	0
Ran Away	0
TOTAL	1,707

*There were four children whose follow-up status was unknown. These are children who could not be contacted by FPS or CP&P for a variety of reasons, i.e. their CP&P case was closed or the family moved out of NJ. These children were not included in the number of follow-ups.

SECTION IV: CONCLUSION

DCF recognizes the role FPS programs have in supporting safety, permanency, and well-being for children and families involved with New Jersey's child welfare system. The FPS model complements the Department's mission to engage families and increase family participation in the identification and use of services that build upon their strengths and improve family functioning. DCF is committed to maximizing its existing resources to ensure that FPS services remain available to children and families throughout New Jersey.